

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		71530	1/11
O.I.P.E. CLASSIFIER		5	1-24-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	CP	70203	23

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	15	15	6/6/2002
2	3	3	2/8/2002
3	8	8	5/8/2002
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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